



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION  
OF  
HAZARDOUS WASTE ACTIVITY**

04/03/2015

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

<b>EPA I.D. NUMBER:</b>	<b>NYR000217778</b>
<b>INSTALLATION NAME:</b>	<b>NYCDOT - SIM CITYWIDE CONCRETE</b>
<b>INSTALLATION ADDRESS :</b>	<b>8 29TH ST BROOKLYN, NY 11232</b>
<b>MAILING ADDRESS :</b>	<b>8 29TH ST BROOKLYN, NY 11232</b>

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2  
RCRA Programs Branch  
290 Broadway, 22nd Floor  
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS  
Tel : (212) 637-4106  
Fax: (212) 637-4437**

**TO: NYCDOT - SIM CITYWIDE CONCRETE  
or Current Occupant  
ATTN: HORACE JOHNSON  
8 29TH ST  
BROOKLYN, NY 11232**

*New*

*ml*

<p><b>SEND COMPLETED FORM TO:</b> The Appropriate State or Regional Office.</p>	<p>United States Environmental Protection Agency <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b></p>		<p>2015 FEB 19 P 2 RCRA PROGRAMS BRANCH</p> 
<p><b>1. Reason for Submittal</b></p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p><b>Reason for Submittal:</b></p> <p><input checked="" type="checkbox"/> To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)</p> <p><input type="checkbox"/> To provide a Subsequent Notification (to update site identification information for this location)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report (If marked, see sub-bullet below)</p> <p><input type="checkbox"/> Site was a TSD facility and/or generator of <math>\geq 1,000</math> kg of hazardous waste, <math>&gt;1</math> kg of acute hazardous waste, or <math>&gt;100</math> kg of acute hazardous waste spill cleanup in <u>one or more months</u> of the report year (or State equivalent LQG regulations)</p>		
<p><b>2. Site EPA ID Number</b></p>	<p>EPA ID Number <u>N Y R   0 0   0   2 1 7   7 7 8</u></p>		
<p><b>3. Site Name</b></p>	<p>Name: NYC DOT - SIM / Citywide Concrete</p>		
<p><b>4. Site Location Information</b></p>	<p>Street Address: Eight 29th Street</p> <p>City, Town, or Village: Brooklyn County: Kings</p> <p>State: NY Country: USA Zip Code: 11232</p>		
<p><b>5. Site Land Type</b></p>	<p><input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input checked="" type="checkbox"/> Other</p>		
<p><b>6. NAICS Code(s) for the Site (at least 5-digit codes)</b></p>	<p>A. <u>2   3   7   3   1   0</u> C. _____</p> <p>B. _____ D. _____</p>		
<p><b>7. Site Mailing Address</b></p>	<p>Street or P.O. Box: 8 29th Street</p> <p>City, Town, or Village: Brooklyn</p> <p>State: NY Country: USA Zip Code: 11232</p>		
<p><b>8. Site Contact Person</b></p>	<p>First Name: HORACE MI: Last: JOHNSON</p> <p>Title: SUPERVISOR</p> <p>Street or P.O. Box: 8 29th Street</p> <p>City, Town or Village: Brooklyn</p> <p>State: New York Country: USA Zip Code: 11231</p> <p>Email: Hjohnson@dot.nyc.gov</p> <p>Phone: <u>212-839-2101</u> Ext.: <u>—</u> Fax: <u>212-839-2105</u></p>		
<p><b>9. Legal Owner and Operator of the Site</b></p>	<p>A. Name of Site's Legal Owner: EDC DEVELOPMENT CORP Date Became Owner: 1900 <u>JAN 1</u></p> <p>Owner Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input checked="" type="checkbox"/> Other</p> <p>Street or P.O. Box: 110 William Street</p> <p>City, Town, or Village: New York Phone: (212) 619-5000</p> <p>State: NY Country: USA Zip Code: 11232 /</p> <p>B. Name of Site's Operator: Horace Johnson Date Became Operator: June 2012</p> <p>Operator Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input checked="" type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		

*Rec 2/19/15. Called & emailed 2/19/15 3/4/15*  
*On latter date Mr Nixon provided ownership / operate dates*



**D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K**

❖ You can **ONLY** Opt into Subpart K if:

- you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
- you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

Y  N 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories  
**See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:**

- a. College or University
- b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
- c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

Y  N 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

**11. Description of Hazardous Waste**

**A. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D002						

**B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.** Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

D002						

